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## \*BIBDATASHEET\*

CONFIRMATION NO. 2863

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/698,414	<b>FILING OR 371(c) DATE</b> 11/03/2003 <b>RULE</b>	<b>CLASS</b> 132	<b>GROUP ART UNIT</b> 3732	<b>ATTORNEY DOCKET NO.</b> 231184US26
<b>APPLICANTS</b> Aline Abergel, Boulogne, FRANCE;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/428,701 11/25/2002 and claims benefit of 60/428,707 11/25/2002				
<b>** FOREIGN APPLICATIONS *****</b> FRANCE 02 13756 11/04/2002 FRANCE 02 13757 11/04/2002				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 01/30/2004				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 49
Examiner's Signature _____ Initials _____		<b>INDEPENDENT CLAIMS</b> 3		
<b>ADDRESS</b> 22850				
<b>TITLE</b> PACKAGING DEVICE FOR A PRODUCT INCLUDING A DETACHABLE APPLICATOR				
<b>FILING FEE RECEIVED</b> 2072	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	